## CSPD Inservice To Do List Inservice Coordinator Responsibilities

Title of Inservice: Inservice Coordinator(s):		Date:		
Site	Coordinator(s):			
	TO DO	By Whom	By When	Done ☑
PRI	OR TO WORKSHOP		•	•
1.	Set Date (in conjunction with Site Coordinator/		6-8 weeks	

	TO DO	By Whom	By When	Done <b>☑</b>			
PRI	PRIOR TO WORKSHOP						
1.	Set Date (in conjunction with Site Coordinator/		6-8 weeks				
	Regional CSPD)		prior				
2.	Obtain info from Site Coordinators		6-8 weeks				
	<ul><li>Location, address, for inservice</li></ul>		prior				
	<ul><li>Contact person's name, address, fax,</li></ul>						
	phone number where registration will be						
	sent/ questions will be directed						
3	Contact presenters- confirm dates		6-8 wks				
			prior				
4.	Create flyer		6-8 wks				
	D: ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	(0) : 1)	prior				
5.	Distribute flyer-make copies, mailing labels. send	(Clerical)	6-8 wks				
	Out	(Olaniaal)	prior				
6.	Post on CSPD Web site/ Send to TEACHNET	(Clerical)	6-8 wks				
7	Print Bill for CSPD Honorarium* for presenter		prior				
7.			4 wks prior	Ш			
Ö	Arrange for OPI credit- fill out OPI forms, make copies, send to Susan Bailey Anderson for		4 wks prior				
	signature						
9.	Arrange for University credit (if applicable)		6-8 wks				
9.	Arrange for Oniversity credit (ii applicable)		prior				
10	Send OPI and University info and honorarium		2-3 weeks				
10	forms to site coordinator		prior				
AFT	ER WORKSHOP		prior				
1.	Receive Purchase orders/ checks/ honorariums/		After				
''	bills, <i>Inservice Roster</i> * from Site Coordinator		workshop				
2.	Send CSPD Invoice* for purchase orders		After				
	, , , , , , , , , , , , , , , , , , ,		workshop				
3.	Record expenses on Inservice Budget Form*		After				
	·		workshop				
4.	Send checks, bills, honorariums to clerk		After				
	responsible for CSPD Grant		workshop				
5.	Send copy of Inservice Roster* to Susan Bailey		After				
	Anderson re OPI Renewal forms		workshop				
6.	Send info regarding credit to appropriate		After				
	university		workshop				
7.	Upon receipt of CSPD Activity Evaluation* packet		Next CSPD	_			
	from Site coordinator		regional				
	□ Attach Inservice Budget Form*		mtg				
	<ul> <li>Send/give completed packet to CSPD</li> </ul>						
	Chairperson		0000	_			
8.	Share results at next Regional CSPD mtg		CSPD				
			meeting				

Thanks for a Job Well Done!!!!